

GENERAL INFORMATION FOR ALL PHYSICAL THERAPIST AND PHYSICAL THERAPIST ASSISTANT APPLICANTS

Submit all applications for licensure in typewritten form or clearly printed, answering each question on the application as accurately as possible.

Include with the application, any additional required documentation and a check or money order in the appropriate fee amount made payable to the "Professional Licensing Agency".

*******Be sure to include an email address as the Agency uses this form of communication as it's preferred method.*******

State Fees Schedule:

Application for PT Licensure/PTA Certification: \$100.00

Temporary Permit: \$50.00

Renewal of Licensure/Certification: \$100.00

Reinstatement (penalty fee for less than 3 years: \$ 50.00 delinquent renewal)

Reinstatement (penalty fee for greater than 3 years: \$100.00 delinquent renewal)

Examination Fee:

Cost of Examination \$370.00 (paid directly to FSBPT)

Criminal Background Checks

As of **July 1, 2011** all applicants **MUST** complete a criminal background check (CBC). To start your CBC visit www.L1enrollment.com. **Note:** *A CBC completed prior to the submission of an application for licensure will not be considered valid. If an application is not received by IPLA **before** scheduling a CBC, the applicant will be required to submit to another check **resulting in additional fees**.*

*** NOTE: Your Social Security number is required by the Professional Licensing Agency in accordance with IC 4-1-8-1. Disclosure is mandatory and this application cannot be processed without it. Failure to disclose your Social Security number will result in the denial of your application. Application fees are nonrefundable.**

• In accordance with 844 IAC 12-4-2, it is the responsibility of the applicant and/or certificate holder to notify the committee of any changes in name or address in writing within thirty (30) days of the change. Failure to receive notification of renewal due to failure to notify the committee of a change of address or name shall not constitute an error on the part of the committee, board, or agency, nor shall it exonerate or otherwise excuse the certificate holder from renewing such

certification. Renewal notices will be sent by email, if an email address is provided.

- Applicants should allow two (2) to four (4) weeks for the processing and review of their application. It is illegal to practice as a Physical Therapist or Physical Therapist Assistant during this processing time until receiving license/certification approval from the committee.
- Applications will not be reviewed until the Committee office receives all the required documentation. If your file is incomplete due to missing documentation, you will be notified by email regarding the status of your file two (2) to four (4) weeks after the agency receives your application. The status letter will list all documents outstanding from your file.
- In order to assist the staff in the processing of your certification, please do not telephone regarding the status of your application. Do not have someone else call to obtain information on your behalf. Information regarding exam scores and/or denial of your application file will only be given to the applicant in written form. This information will not be given by telephone.
- Any notarized copy of an original document must include a statement from the notary that the notary has seen the original document.
- **All pending files (incomplete) shall be closed after one (1) year from date of application, at which time reapplication will be necessary.**

If you answer yes to any of the questions on the last page of the application please submit the following along with your application:

- A typed and DETAILED explanation of the incident(s)
- Court documents regarding the incident(s) explaining the charges, fines and current disposition
- Proof of completion of all court ordered remediation (i.e. probation, court ordered alcohol/drug treatment, community service, etc)

Failure to submit the aforementioned information will result in the delay of your application. All positive response applications are subject to the review of the Committee.

For further information regarding the Committee, including its meeting schedule, a listing of current Committee members, physical therapist and physical therapist assistant applications and the Statute and Rules relating to licensure/certification in the field of physical therapy, please visit the Committee's web site at <http://www.in.gov/pla/pt.htm>.

EXAMINATION CANDIDATES

APPLICATION INSTRUCTIONS FOR PHYSICAL THERAPIST LICENSE AND PHYSICAL THERAPIST ASSISTANT CERTIFICATION

Examination applicants must submit the following:

1. Completed application with \$100.00 application fee made payable to the Professional Licensing Agency. **Examination candidates are responsible for three types of payment, which must be submitted before being permitted to sit for the examination:**

A. PROFESSIONAL LICENSING AGENCY: Physical therapist or physical therapist assistant graduates must submit a fee of \$100 made payable to the Professional Licensing Agency with the application. All application fees are non-refundable.

B. FEDERATION OF STATE BOARDS OF PHYSICAL THERAPY (FSBPT): Physical therapist or physical therapist assistant graduates must submit an examination fee of \$370 to FSBPT. You will need to visit the FSBPT website at www.fsbpt.org to register for the examination and to choose your payment option.

C. PROMETRIC - COMPUTERIZED TESTING: Physical therapist graduates must submit \$65 to the testing center at the time of examination scheduling. **Physical therapist assistant graduates** must submit \$50 to the testing center at the time of examination scheduling.

2. Two (2) recent passport type photographs of the applicant, approximately two (2) inches by two (2) inches in size.

3. An official (certified) transcript of grades from the school from which the physical therapist or physical therapist assistant obtained his or her degree that shows that the applicant has met all requirements for graduation. The transcript must have a statement that the degree has been conferred. Transcripts must come directly from the degree granting institution. Graduates of foreign physical therapy programs must submit an official translation if the transcript is not in English.

4. If you answered “yes” to any question on page 2 of your application, explain fully, including all related details in a signed and notarized statement. Include the violation, location, date, and disposition. Applicants should submit court documents related to criminal matters.

5. A notarized copy of a marriage certificate or an official affidavit indicating any legal name change, if your name differs from that on any documents.

6. An original detail credentials evaluation is required of all graduates of foreign physical therapy programs. The credentials evaluation must indicate that the degree received from the foreign program is equivalent to an approved educational program in physical therapy in the United States.

The credential evaluation must be specifically prepared for the State of Indiana by one of the four services listed below, and must be no more than 6 months old:

Foreign Credentialing Commission on Physical Therapy (FCCPT)

124 West Street, South, 3rd Floor

Alexandria, Virginia 22314

Phone: 703-684-8406

Fax: 703-684-8715

Fccpt@fccpt.org

International Consultants of Delaware, Inc. (ICD)

109 Barksdale Professional Center

Newark, Delaware 19711-3258

Phone: 302-737-8715

Fax: 302-737-8756

lcd@icdel.com

International Credentialing Associates, Inc. (ICA)

7245 Bryan Dairy Road

Bryan Dairy Business Park II

Largo, Florida 33777

Phone: 727-549-8555

Fax: 727-549-8554

ica_lili@yahoo.com

International Educational Research Foundation, Inc. (IERF)

PO Box 3665

Culver City, CA 90231

Phone: 310-258-9451

Fax: 310-342-7086

www.ierf.org

Please Note: Candidates must contact the credentialing evaluation services for application and fee information. Reports must be specifically prepared for the State of Indiana and must be sent directly to this office from the evaluation service. Any fees incurred for the evaluation are the responsibility of the applicant.

TEMPORARY PERMIT INFORMATION

A person with a temporary permit may only practice physical therapy or act as a physical therapist assistant under the direct supervision of an Indiana licensed physical therapist that is responsible for the patient.

Examination applicants seeking a temporary permit must submit the following:

1. Appropriate application form with the temporary permit fee of \$50.00, plus the initial application fee of \$100.00.

2. Two (2) recent passport type photographs of the applicant, approximately two (2) inches by two (2) inches in size, signed in black ink along the bottom with each application.

3. If you answered “yes” to any questions on page 2 of your application, explain fully, including all related details in a signed and notarized statement. Include the violation, location, date, and disposition. Applicants should submit court documents related to criminal matters.

4. An official (certified) transcript of grades from the school from which the physical therapist or physical therapist assistant obtained his or her degree that shows that the applicant has met all requirements for graduation. The transcript must have a statement that the degree has been conferred. Transcripts must come directly from the degree granting institution. Graduates of foreign physical therapy programs must submit an official translation if the transcript is not in English.

5. The [Supervision Letter](#) must be completed in full by the supervising Indiana licensed physical therapist indicating he/she will be providing direct supervision to the applicant.

Original signatures must be on the form. No letter or other form will be accepted. No faxed copies will be accepted.

6. An original detail credentials evaluation as indicated previously in the application instructions is required of all graduates of foreign physical therapy schools.

A temporary permit shall expire on the earliest date that any one (1) of the following events occurs:

1. The applicant becomes licensed or certified.

2. The application for licensure or certification is disapproved.

3. Ninety (90) days has passed since the issuance of the temporary permit.

TESTING ACCOMMODATION REQUEST

If you have a disability that may require an accommodation in taking the examination, please submit the [Testing Accommodation Request Form](#).

ENDORSEMENT CANDIDATES **APPLICATION INSTRUCTIONS FOR PHYSICAL THERAPIST LICENSE AND PHYSICAL THERAPIST ASSISTANT CERTIFICATION**

Applicants must submit the following documentation:

1. Completed application with \$100.00 application fee made payable to the Professional Licensing Agency. All application fees are non-refundable.
2. Two (2) recent passport type photographs of the applicant, approximately two (2) inches by two (2) inches in size.
3. An official (certified) transcript of grades from the school from which the physical therapist or physical therapist assistant obtained his or her degree that shows that the applicant has met all requirements for graduation. The transcript must have a statement that the degree has been conferred. Transcripts must come directly from the degree granting institution. Graduates of foreign physical therapy programs must submit an official translation if the transcript is not in English.
4. A notarized copy of a marriage certificate or an official affidavit indicating any legal name change, if your name differs from that on any documents.
5. If you answered “yes” to any questions on page 2 of your application, explain fully, including all related details in a signed and notarized statement. Include the violation, location, date, and disposition. Applicants should submit court documents related to criminal matters.
6. Verification of state licensure must be completed by every state where you hold or have held a license or certification to practice ANY regulated profession. This form needs to be submitted to the Indiana Physical Therapy Committee by the state in which you hold or have held a license or certification. A copy of your license is not sufficient.
7. Official National Physical Therapy Exam score transfer report from the Federation of State Boards of Physical Therapy (FSBPT). Please visit their website at www.fsbpt.org to have your exam scores transferred to the Indiana

Physical Therapy Committee. Passing score on this exam is a converted score of seventy-five (75).

TEMPORARY PERMIT INFORMATION

A person with a temporary permit may only practice physical therapy or act as a physical therapist assistant under the direct supervision of an Indiana licensed physical therapist that is responsible for the patient.

Endorsement applicants seeking a temporary permit must submit the following:

1. Appropriate application form with the temporary permit fee of \$50.00, plus the initial application fee of \$100.00, made payable to the Professional Licensing Agency. All application fees are non-refundable.
2. Two (2) recent passport type photographs of the applicant, approximately two (2) inches by two (2) inches in size.
3. If you answered “yes” to any questions on page 2 of your application, explain fully, including all related details in a signed and notarized statement. Include the violation, location, date, and disposition. Applicants should submit court documents related to criminal matters.
4. A notarized copy of your current physical therapist or physical therapist assistant license/certification OR license verification from the state in which you are currently licensed. (This is only accepted for the purposes of obtaining a temporary permit)
5. The [Supervision Letter](#) must be completed in full by the supervising Indiana licensed physical therapist indicating he/she will be providing direct supervision to the applicant. Original signatures must be on the form. No letter or other form will be accepted. No faxed copies will be accepted.

A temporary permit shall expire on the earliest date that any one (1) of the following events occurs:

1. The applicant becomes licensed or certified.
2. The application for licensure or certification is disapproved.
3. Ninety (90) days has passed since the issuance of the temporary permit.

RENEWAL INFORMATION

All physical therapy and physical therapist assistant licenses expire June 30th of every even year regardless of when they were issued. Licenses issued within 90 days of their expiration date will not be required to renew until the following renewal cycle. If you prefer to have your license issued within this 90 day window, please notify our office in writing. If you have any questions regarding this policy, please contact us at (317) 234-2051 or pla6@pla.IN.gov.

THE FAIR INFORMATION PRACTICE ACT

In compliance with IC 4-1-6, this agency is notifying you that you must provide the requested information or your application will not be processed. You have the right to challenge, correct, or explain information maintained by this agency. The information you provide will become public record. Your examination scores and grade transcripts are confidential except in circumstances where their release is required by law, in which case you will be notified.

PROFESSIONAL LICENSING AGENCY

If you have questions concerning the application process, please call 317-234-2051, visit our website at <http://www.in.gov/pla/pt.htm> or e-mail at pla6@pla.in.gov.

If you have any changes to the information you provided during the application process or after you are licensed (i.e. name change, address), be advised that it is *your* responsibility to update that information with the Professional Licensing Agency. To update your name, you must submit proof of change (marriage certificate, legal name change court document, divorce decree) by mail email or fax. To update your address, you may submit this information by mail, fax, or e-mail.

Revised 8/2013